

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?:

Computer Readable Form (CRF)?:

Number of copies of CRF::

Title:: MONITORING AND SYNCHRONIZATION OF  
POWER USE OF COMPUTERS IN A NETWORK

Attorney Docket Number:: 005400.00003

Request for Early Publication?: NO

Request for Non-Publication?: YES

Suggested Drawing Figure:: 3

Total Drawing Sheets:: 18

Small Entity?: YES

Latin name::

Variety denomination name::

Petition included?: NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?: NO

## Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: USA  
Status:: Full Capacity  
Given Name:: Michael  
Middle Name::  
Family Name:: Thelander  
Name Suffix::  
City of Residence:: Gresham  
State or Province of Residence:: Oregon  
Country of Residence:: USA  
Street of mailing address::  
City of mailing address:: Gresham  
State or Province of mailing address:: Oregon  
Country of mailing address:: USA  
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: USA  
Status:: Full Capacity  
Given Name:: Peter  
Middle Name::  
Family Name:: Carbon  
Name Suffix::  
City of Residence:: Beaverton  
State or Province of Residence:: Oregon  
Country of Residence:: USA  
Street of mailing address::  
City of mailing address:: Beaverton  
State or Province of mailing address:: Oregon

Country of mailing address:: USA  
 Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor  
 Primary Citizenship Country:: USA  
 Status:: Full Capacity  
 Given Name:: Cindy  
 Middle Name::  
 Family Name:: Tatham  
 Name Suffix::

City of Residence:: North Plains  
 State or Province of Residence:: Oregon  
 Country of Residence:: USA  
 Street of mailing address::

City of mailing address:: North Plains  
 State or Province of mailing address:: Oregon  
 Country of mailing address:: USA  
 Postal or Zip Code of mailing address::

### Correspondence Information

Correspondence Customer Number:: 22909

### Representative Information

Representative Customer Number:: 22909

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-Part of	60/304,136	07/09/01

